

DALE TOMLIN
GRANTOR(S)

QUITCLAIM
DEED

TO

LARRY DEWAINE MOONEY
GRANTEE(S)


FOR AND IN CONSIDERATION of Ten Dollars (\$10.00), cash in hand paid, and for other good and valuable considerations, the receipt and sufficiency of all of which is hereby acknowledged **DALE TOMLIN, GRANTOR(S)**, does hereby sell, convey, and quitclaim unto **LARRY DEWAINE MOONEY, GRANTEE(S)**, all her rights title and interest in the following described property situated in the County of DeSoto, State of Mississippi, together with all improvements and appurtenances thereon more particularly described as follows:

LOT 55, SECTION A, DESOTO WOODS SUBDIVISION, situated in Section 2, Township 2 South, Range 8 West, DeSoto County, Mississippi, as per plat thereof recorded in Plat Book 5, Page 26, in the Office of the Chancery Clerk of DeSoto County, Mississippi.

Being the same property as conveyed to Grantor(s) of record in Deed Book 450, Page 214, in the Office of the Chancery Clerk of DeSoto County, Mississippi.

By way of explanation, Billy Joe Stiles departed this life on October 6, 2008, leaving his sister, Dale Tomlin, as the surviving tenant as evidenced by the Certificate of Death attached hereto and made a part of this instrument.

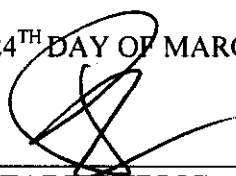
WITNESS OUR SIGNATURE(S) this the 24th day of March, 2009.


Dale Tomlin

STATE OF MISSISSIPPI
COUNTY OF DESOTO

PERSONALLY APPEARED before me, the undersigned authority at office in and for the State and County aforesaid, the within named **DALE TOMLIN** who acknowledged that she signed and delivered the above and foregoing instrument for the purposes therein contained, and as her free act and deed and for purposes therein contained.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS THE 24TH DAY OF MARCH, 2009.


NOTARY PUBLIC

My Commission Expires:



NO TITLE WORK REQUESTED OR PERFORMED

GRANTOR'S ADDRESS
2316 Plum Point Cv.
Southaven, MS 38672
662-349-2864 n/a
HM PHONE WK PHONE

GRANTEE'S ADDRESS
1324 Great Oaks Drive
Horn Lake, MS 38637
NA NA
HM PHONE WK PHONE



MISSISSIPPI STATE DEPARTMENT OF HEALTH
VITAL RECORDS

BK 605 PG 478



TYPE OR PRINT WITH BLACK INK

DECEASED

FILING DATE: OCT 17 2008

CERTIFICATE OF DEATH
STATE OF MISSISSIPPI

STATE FILE NUMBER: 123-08-021365

1. NAME: Billy Joe Stiles
2. SEX: Male
3a. HOUR OF DEATH: unknown
3b. DATE OF DEATH: October 6, 2008
4. RACE: White
5a. AGE AT LAST BIRTHDAY: 71
5b. MOS: 12
5c. DAYS: 1-4
5d. HOURS: 5e. MINS: 5+
6. DATE OF BIRTH: Nov. 5 1936
7a. COUNTY OF DEATH: Desoto
7b. CITY OR TOWN OF DEATH: Southaven
7c. HOSPITAL OR OTHER INSTITUTION-NAME AND NUMBER: 1324 Great Oaks Drive
7d. IF IN HOSP. OR INST. SPECIFY INPT. OUTPT. EMER. RM. OR DOA: TN
9. DECEDENT'S EDUCATION: Elem/High School
10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Divorced
11. SURVIVING SPOUSE: None
12. WAS DECEASED EVER IN U.S. ARMED FORCES?: Yes
13. ORIGIN OR DESCENT: American
14. SOCIAL SECURITY NUMBER: 426-68-8436
15a. USUAL OCCUPATION: Contractor
15b. KIND OF BUSINESS OR INDUSTRY: Paint
16a. RESIDENCE-STATE: MS
16b. COUNTY: Desoto
16c. CITY OR TOWN: Southaven
16d. INSIDE CITY LIMITS: Yes
16e. STREET AND NUMBER OR RURAL LOCATION: 1324 Great Oaks Drive
17. FATHER-NAME: Wilbur Lafayette Stiles
18. MOTHER-NAME: Lura Inez Jobe
19a. INFORMANT-NAME: Dale Tomlin
19b. MAILING ADDRESS: 2316 Plum Point Cove, Southaven, MS 38672-6436
20a. BURIAL, CREMATION, REMOVAL: Burial
20b. CEMETERY, CREMATORY-NAME: Bethlehem Cemetery
20c. LOCATION: Memphis, TN
20d. FUNERAL HOME-NAME AND MISSISSIPPI I.D. NUMBER: Brantley Funeral Home 17R
20e. MAILING ADDRESS: P. O. Box 428, Olive Branch, MS 38654-0428
22a. PERSON WHO PRONOUNCED DEATH: Jeffery Pounders, CMEI
22b. PRONOUNCED DEAD: Oct 7, 2008
22c. PRONOUNCED DEAD: 11:20 am
23a. CERTIFIER-NAME: Jeffery Pounders
23b. MAILING ADDRESS: 4942 Pounders Rd, Nesbit, MS 38651
24a. To the best of my knowledge, death occurred due to the cause(s) and manner as stated.
24b. DATE SIGNED: October 10, 2008
24c. STATE LICENSE NUMBER: MD
24d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER
24e. On the basis of examination and/or investigation, in my opinion, death occurred due to the cause(s) and manner as stated.
24f. SIGNATURE: Jeffery Pounders
24g. DATE SIGNED: October 10, 2008
24h. TITLE: DeSoto Co. Coroner
25. PART I. DEATH CAUSED BY:
(a) cancer of liver
(b) DUE TO, OR AS A CONSEQUENCE OF
(c) DUE TO, OR AS A CONSEQUENCE OF
26. PART II. OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in PART I: diabetes mellitus, hypertension, chronic obstructive pulmonary disease
27. AUTOPSY: no
28. WAS CASE REFERRED TO MEDICAL EXAMINER?: yes
29a. ACCIDENT, SUICIDE, HOMICIDE, PENDING INVESTIGATION, OR UNDETERMINED
29b. DATE OF INJURY
29c. HOUR OF INJURY
29d. DESCRIBE HOW OR BY WHAT MEANS INJURY OCCURRED
29e. INJURY AT WORK
29f. PLACE OF INJURY
29g. LOCATION

THIS IS TO CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT COPY OF THE CERTIFICATE ON FILE IN THIS OFFICE

OCT 21 2008

Judy Moulder

Judy Moulder
STATE REGISTRAR

WARNING: A REPRODUCTION OF THIS DOCUMENT RENDERS IT VOID AND INVALID. DO NOT ACCEPT UNLESS EMBOSSED SEAL OF THE MISSISSIPPI STATE BOARD OF HEALTH IS PRESENT. IT IS ILLEGAL TO ALTER OR COUNTERFEIT THIS DOCUMENT.

VERIFY PRESENCE OF WATERMARK HOLD TO LIGHT TO VIEW

FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER. THIS IS WATERMARKED PAPER. DO NOT ACCEPT WITHOUT FIRST HOLDING TO LIGHT TO VERIFY WATERMARK.



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE